Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at http://about.jstor.org/participate-jstor/individuals/early-journal-content.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

an epidemic of an infectious disease, to which I am not able to give a name. The *tableau clinique* of this disease consists of weariness, which lasts one or two days, and is followed by an elevation of the temperature of the body. The thermometer shows 39 or 39.5 centigrade. At this time the skin is covered by an eruption which resembles that of measles. On the second or third day of the eruption one or more articulations swell and become painful. Two or three days after the eruption the temperature becomes normal and also the articulations, but the latter's pain and swelling may last more than four or five days. The urine during this disease is normal, and I have not observed any complications in the other organs. I have seen several cases of the above-described disease in persons who have had measles last year. I have not seen any fatal case.

A few deaths from smallpox are always registered on the monthly bulletins of mortality. * * *

The sanitary news which arrives from the different provinces shows that in nearly all the provinces of Asia Minor spotted typhus is raging, as well as typhoid fever, smallpox, and dysentery.

From Bitlis, in Asia Minor, on the Lake of Vara, among the men of Hamidieh regiment, i. e., the Kurdish imperial cavalry, several cases of bubonic plague have occurred, of which 15 proved fatal. It is so stated in a dispatch dated 22d of last May. I will write in my next report whether any sanitary steps have been ordered.

Cholera in Egypt is spreading in the different provinces, though it is abating in Alexandria.

Since the beginning of the epidemic, up to the 2d instant, 2,643 cholera cases have been registered, of which 2,223 proved fatal.

SPIRIDION C. ZAVITZIANO.

STATISTICAL REPORTS.

BERMUDA.—Week ended June 5, 1896. Estimated population, 15,013. No deaths.

CUBA—*Habana.*—Under date of June 20, 1896, the United States sanitary inspector reports as follows:

There were 193 deaths in this city during the week ending June 18, 1896. Eleven of those deaths were caused by yellow fever, with approximately 25 new cases; 10 were caused by enteric fever, 5 by so-called pernicious fever, 1 by paludal fever, 2 by dysentery, 21 by enteritis, 12 by smallpox, 1 by measles, 6 by pneumonia, 1 by glanders, and 19 by tuberculosis.

Of the 11 deaths by yellow fever during the week, 10 occurred among the Spanish troops in the military hospital.

A paper published has the rumor that cases of Asiatic cholera were reported from Matanzas, and Inspector Losada, of the army, went to that city. Later it was denied. Probably acute enteritis, very common at this time of the year, was taken for Asiatic cholera.

FRANCE—*Nice.*—Month of April, 1896. Estimated population, 106,546. Total deaths, 200, including 28 from phthisis pulmonalis.

GREAT BRITAIN—*England and Wales.*—The deaths registered in 33 great towns of England and Wales during the week ended June 6 correspond to an annual rate of 17.8 a thousand of the aggregate population, which is estimated at 10,846,948. The highest rate was recorded in Bolton, viz, 23.8, and the lowest in Preston, viz, 10.5 a thousand.

London.—One thousand four hundred and sixty-nine deaths were registered during the week, including measles, 115; scarlet fever, 13; diphtheria, 52; whooping cough, 86; enteric fever, 7, and diarrhea and dysentery, 17. The deaths from all causes correspond to an annual rate of 7.3 a thousand. In greater London 1,874 deaths were registered, corresponding to an annual rate of 15.8 a thousand of the population. In the "outer ring" the deaths included 7 from diphtheria, 32 from measles, 24 from whooping cough, and scarlet fever, 3.

Ireland.—The average annual death rate represented by the deaths registered during the week ended June 6 in the 16 principal town districts of Ireland was 22 a thousand of the population. The lowest rate was recorded in Lisburn, viz, 4.3, and the highest in Dundalk, viz, 46.1 a thousand. In Dublin and suburbs 133 deaths were registered, including scarlet fever, 2; typhus fever, 1, and whooping cough, 1.

Scotland.—The deaths registered in 8 principal towns during the week ended June 6 correspond to an annual rate of 19.2 a thousand of the population, which is estimated at 1,518,347. The lowest mortality was recorded in Leith, viz, 14.7, and the highest in Perth, viz, 22.2 a thousand. The aggregate number of deaths registered from all causes was 560, including scarlet fever, 8; diphtheria, 4; measles, 25, and whooping cough, 26.

ST. HELENA.—Five weeks ended May 16, 1896. Estimated population, 3,600. Total deaths, 7. No deaths from contagious diseases.